

11/2/2017

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2017-11-02 09:37 CST

121 2023 11-02 09:37 CST From: Amber Laughrey

Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (512)418-6949
Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

Foreign Limited Liability Company
Mariner Audubon Park, LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$125.00 |

2017 NOV -2 AM 11:52

FALL ANNUAL REPORT

RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

17 NOV -2 AM 9:35

FILED

S. WARREN

NOV 03 2017

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Mariner Audubon Park, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")
2. DE
(Jurisdiction under the law of which foreign limited liability company is organized)
3. _____
(FEI number, if applicable)
4. 11/01/2017
(Date first transacted business in Florida, if prior to registration;
(See sections 605.0704 & 605.0905, F.S. to determine penalty liability))
5. 999 Waterside Drive, Suite 2300
(Street Address of Principal Office)
Norfolk, VA, 23510
6. 999 Waterside Drive, Suite 2300
(Mailing Address)
Norfolk, VA, 23510
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: CT Corporation
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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17 NOV -2 AM 9:35
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Kim Wasilewski
(Registered agent's signature)

Kim Wasilewski
Assistant Secretary

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

| <u>Title or Capacity:</u> | <u>Name and Address:</u> | <u>Title or Capacity:</u> | <u>Name and Address:</u> |
|---------------------------|--------------------------|---------------------------|--------------------------|
|---------------------------|--------------------------|---------------------------|--------------------------|

| | | | |
|--------------------|-----------------------------|--|--|
| Manager of | T. Richard Litton, Jr. | | |
| Mariner Audubon | 999 Waterside Dr., Ste 2300 | | |
| Park Managing Co., | Norfolk, VA 23510 | | |
| LLC, its Manager | | | |

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

T. Richard Litton, Jr.
Signature of an authorized person

T. Richard Litton, Jr.

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "MARINER AUDUBON PARK, LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2017.



6593563 8300

SR# 20176803325

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 203472145

Date: 10-27-17